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CONFIRMATION NO. 5154

<b>SERIAL NUMBER</b> 10/772,449	<b>FILING OR 371(c) DATE</b> 02/06/2004 <b>RULE</b>	<b>CLASS</b> 434	<b>GROUP ART UNIT</b> 3714	<b>ATTORNEY DOCKET NO.</b> 026096-00006
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## APPLICANTS

John F. Boon, Washington, DC;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/237,044 09/09/2002 PAT 7,011,526 which is a CON of 09/455,160  
 12/06/1999 PAT 6,447,299  
 which is a CON of 09/042,635 03/17/1998 PAT 6,022,221  
 which claims benefit of 60/042,326 03/21/1997  
 This application 10/772,449 *yes 10/*  
 claims benefit of 60/445,235 02/06/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NO 1A*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*

\*\* 05/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY DC	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged Examiner's Signature <i>AKM</i> Initials <i>BA</i>				

## ADDRESS

4372

## TITLE

Authoring tool and method of use

<b>FILING FEE RECEIVED</b> 493	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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